



PTO/SB/02A (08-03)

Approved for use through 07/31/2006. OMB 0651-0032

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DECLARATION**ADDITIONAL INVENTOR(S)**
Supplemental SheetPage 1 of 2

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
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Norimitsu		UMEHARA	
Inventor's Signature <i>Norimitsu Umebara</i>		Date <i>Apr. 23, 2004</i>	
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Tetsuo		HAYASHI	
Inventor's Signature <i>Tetsuo Hayashi</i>		Date <i>Apr. 23, 2004</i>	
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This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Docket No. 1/1485

DECLARATION**ADDITIONAL INVENTOR(S)**
Supplemental SheetPage 2 of 2

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
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Yoichi		ONUKE	
Inventor's Signature <i>Yoichi Onuki</i>		Date <i>Apr. 23, 2007</i>	
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City Narita-shi	State Chiba	Zip 286-0015	Country Japan
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Kazuki		MATSUMOTO	
Inventor's Signature <i>Kazuki Matsumoto</i>		Date <i>Apr. 23, 2007</i>	
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
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Mailing Address			
Mailing Address			
City	State	Zip	Country

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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input type="checkbox"/> Declaration Submitted with Initial Filing OR <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Attorney Docket Number	1/1485
	First Named Inventor	Minoru OKADA
	COMPLETE IF KNOWN	
	Application Number	10 / 803,674
	Filing Date	03/18/2004
	Group Art Unit	
	Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Pharmaceutical Compositions Comprising Epinastine For The Treatment Of Skin Diseases

the specification of which
☐ is attached hereto
OR
☒ was filed on (MM/DD/YYYY) **03/18/2004** as United States Application Number or PCT International Application Number **10/803,674** and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
EP 03 007 779	EPO	04/04/2003	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
EP 03 007 759	EPO	04/04/2003	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
EP 03 007 778	EPO	04/09/2003	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
EP 03 008 989	EPO	04/17/2003	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	
		<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☐ Customer Number

OR

☒ Registered practitioner(s) name/registration number listed below

Place Customer Number Bar Code Label here

Name	Registration Number	Name	Registration Number
Robert P. Raymond	25,089	Anthony P. Bottino	41,629
Michael P. Morris	34,513	Susan K. Pocchiari	45,016
Mary-Ellen M. Devlin	27,928	Philip I. Datlow	41,482
Alan R. Stempel	28,991	David A. Dow	46,124
Timothy X. Witkowski	40,232	Andrea D. Small	54,859

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☒ Customer Number or Bar Code Label OR ☐ Correspondence address below

Name			
Address			
Address			
City	State	ZIP	
Country	Telephone	Fax	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Minoru		OKADA	
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		ZIP	270-1323
		Country	Japan

☒ Additional inventors are being named on the 2 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto